

JUN 14 2004  
PATENT & TRADEMARK OFFICE

Please type a plus sign (+) inside this box

+

**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION**  
**(37 CFR 1.63)**

Declaration Submitted with Initial Filing       Declaration Submitted after initial Filing (surcharge (37 CFR 1.16(e)) required)  
OR

Attorney Docket Number	BP2610
First Named Inventor	Stephen Palm
<b>COMPLETE IF KNOWN</b>	
Application Number	10/664,824
Filing Date	9/17/2003
Group Art Unit	
Examiner Name	

**As a below named inventor, I hereby declare that:**

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**LONG RANGE HANDSHAKING COMMUNICATION SYSTEM FOR MULTIPLE XDSL**

the specification of which

*(Title of the Invention)*

is attached hereto

OR

was filed on (MM/DD/YYYY)

9/17/03

as United States Application Number or PCT International

Application Number

10/664,824

and was amended on (MM/DD/YYYY)

*(if applicable)*

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

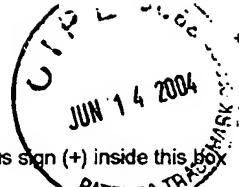
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checkign the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Applications Numbers(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	NO
			<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119 (e), 120, or 365 (c) of any U.S. or PCT application(s) listed below.

Application Numbers(s)	Filing Date (MM/DD/YYYY)	Additional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/411,335	9/17/2002	<input type="checkbox"/>



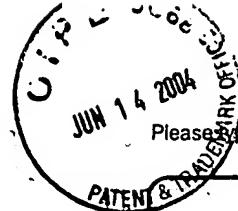
Please type a plus sign (+) inside this box

Approved for use through 10/31/2002. OMB 0651-0035  
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTO/SB/01 (10\_00)

## DECLARATION - Utility or Design Patent Application

Direct all correspondence to:		<input checked="" type="checkbox"/> Customer Number or Bar Code Label	34,399	OR <input type="checkbox"/> Correspondence address below
<b>Name</b> Timothy W. Markison				
<b>Address</b> P.O. Box 160727				
<b>Address</b>				
<b>City</b> Austin		<b>State</b> TX	<b>ZIP</b> 78716-0727	
<b>Country</b> USA		<b>Telephone</b> (512) 342-0612		<b>FAX</b> (512) 342-1674
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>				
<b>NAME OF SOLE OR FIRST INVENTOR:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
<b>Given Name</b> (first and middle [if any]) Stephen		<b>Family Name</b> or Surname Palm		
<b>Inventor's Signature</b>		<b>Date</b> 5 Jun 2004		
<b>Residence: City</b> Irvine		<b>State</b> CA	<b>Country</b> USA	<b>Citizenship</b> USA
<b>Mailing Address</b> 6 Santa Luzia Aisle .				
<b>Mailing Address</b>				
<b>City</b> Irvine		<b>State</b> CA	<b>ZIP</b> 92606	<b>Country</b> USA
<b>NAME OF SECOND INVENTOR:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
<b>Given Name</b> (first and middle [if any])		<b>Family Name</b> or Surname		
<b>Inventor's Signature</b>		<b>Date</b>		
<b>Residence: City</b>		<b>State</b>	<b>Country</b>	<b>Citizenship</b>
<b>Mailing Address</b>				
<b>Mailing Address</b>				
<b>City</b>		<b>State</b>	<b>ZIP</b>	<b>Country</b>
<input type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.				



Please type a plus sign (+) inside this box  +

Approved for use through 10/31/2002. OMB 0651-0035  
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	10/664,824
Filing Date	9/17/2003
First Named Inventor	Stephen Palm
Group Art Unit	
Examiner Name	
Attorney Docket Number	BP2610

I hereby appoint:

Practitioners at Customer Number

34,399

Place Customer Number Bar Code Label Here

OR

Practitioner(s) named below:

Name	Registration Number
Timothy W. Markison	33,534
Bruce E. Garlick	36,520
James A. Harrison	40,401
Shayne X. Short, Ph.D.	45,105

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

The above-mentioned Customer Number.

OR

<input type="checkbox"/> Firm or Individual Name	Timothy W. Markison				
Address	P.O. Box 160727				
Address					
City	Austin	State	TX	Zip	78716-0727
Country	USA				
Telephone	(512) 342-0612	Fax	(512) 342-1674		

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71  
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

title: Manager, IP Portfolio

Signature

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required.  
Submit multiple forms if more than one signature is required, see below\*.

\*Total of 1 forms are submitted.

SEND TO: Assistant Commissioner for Patents,  
Washington, DC 20231



BP2610

**Certificate Under 37 CFR 3.73(b)**

PATENT &amp; TRADEMARK OFFICE

Applicants: Stephen Palm

Entitled: LONG RANGE HANDSHAKING COMMUNICATION SYSTEM FOR MULTIPLE XDSL

Application No. 10/664,824

Filing Date: 9/17/2003

**Broadcom Corporation**

(Name of Assignee)

**a, California Corporation**

(Type of Assignee)

states that it is :

1.  the assignee of the entire right, title, and interest; or
2.  an assignee of an undivided part interest

in the patent application/patent identified above by virtue of either :

A  An Assignment for the inventor(s) of the patent application/patent identified above. The assignment was recorded in the Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.

OR

B.  A chain of title for the inventor(s) of the patent application/patent identified above to the current assignee as shown below:

1. From \_\_\_\_\_ To: \_\_\_\_\_  
The document was recorded in the Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.
2. From \_\_\_\_\_ To: \_\_\_\_\_  
The document was recorded in the Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.
3. From \_\_\_\_\_ To: \_\_\_\_\_  
The document was recorded in the Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.

Additional documents in the chain of title are listed on a supplemental sheet.

Copies of assignments or other documents in the chain of title are attached.

[NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the PTO. See MPEP 302-302.8]

The undersigned (whose title is supplied below) is empowered to act on behalf of the assignee.

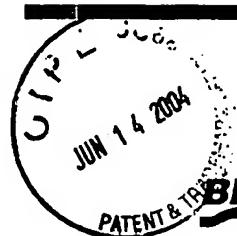
Date: \_\_\_\_\_

Name: Dee Henderson

Manager, Intellectual Property Portfolio

Title: \_\_\_\_\_

Signature:



BP2610

BROADCOM CORPORATION  
16215 Alton Parkway  
Irvine, California 92618

Phone: 949-450-8700  
Fax: 949-450-8710

May 20, 2003

To whom it may concern:

I, Henry Samueli, hereby authorize Dee Henderson, Intellectual Property Portfolio Manager, to execute documents relating to US and foreign patent and trademark matters on behalf of Broadcom Corporation and/or its subsidiaries.

A handwritten signature in black ink, appearing to read "Henry Samueli".

Henry Samueli, Ph.D.  
Chief Technical Officer and Co-Chairman